STATEMENT OF DISSOLUTION

Each political committee, including any subsidiary committee, which after having filed an annual statement of organization wishes to dissolve or disband and (1) determines that it has not received contributions, transfers of funds, or loans and has not made expenditures, transfers of funds, or loans in the aggregate during the calendar year in excess of five hundred dollars (\$500) and does not anticipate doing so or (2) determines that it will no longer receive any contributions, loans, or transfers of funds and will no longer make any expanditures, loans, or transfers of funds, shall file a statement of dissolution with the supervisory committee prior to dissolving. All committee debts and obligations must be paid or otherwise extinguished and any funds on hand must be expended or otherwise distributed before a political committee can dissolve

of funds and will no longer make any expessions and will no longer make any expessions committee prior to dissolving. A any funds on hand must be expended or off	il committ lerwise di	ee debts and stributed befo	rers of funds, shall obligations must ore a political com	l file a statement o be paid or otherwis Mittee can dissolve	f dissolution with se extinguished e.	h the and
Hand deliver or mail to: CAMPAIGN FINAL	NCE, 8401	United Plaza	a Blvd., Suite 200	, Saton Rouge, L	A 70808-7017.	
Full Name and Address of Political Committee Louisians Conservative PAC P.O. Box 40794			PAC	OFFICE USE	ONLY	65
Baton Rouge	LA	70635	\$\frac{4}{2}			00863
2. Name and Address of Committee Chairperson	_					į
1 Marchia C.		ses <u>atta</u> ched sh	eets.	<u>, </u>		
3. Was this Committee the Principal Campaign Committee	ee of a Cand	ikdata?			_ YesX No	
If yes, give the name of the Candidate		96 346 altached				
Was this Committee a Subsidiery Committee designs if yes, give the name of the Candidate or Committee	ted by either		Principal Campaign (Mached sheets.	Committee?	_Yes <u>X</u> No	
WE HEREBY CERTIFY that this committee of otherwise distributed.	ee has no	unpaid debt	s or obligations ar	nd that all funds ha	ve been expend	ded
WE HEREBY CERTIFY that this commade expenditures, transfers of funds, or to (\$500) and does not anticipate doing so, o expenditures, transfers of funds, or loans duri	r (2) will n ing the rem	eceive no cor nainder of the	uring the calendar itribulions, transfe calendar year.	year in excess of rs of funds, or loan	five hundred da is and will make	
WE FURTHER CERTIFY that a complet	ed Commi	ttee Report at	xompanies this \$	tatement of Dissolu	ution,	
Dated <u>01/18/2004</u>						
					2005 F	표
Signature of Committee Chairperson			Daylime	Telephone Number		යි. ම
Signifium of Committée Presiperson	lw		1-225-75;	2-5159 Telephone Number		SEA 2015年 1970年
on 201, Rev. 3/16.		<u> </u>			- C-	Z AT I
					On 5	~

arms and Address of Chair Person	
off Crouere	Cardidate Information
O 8ox 40794	Office Sough) [Include (life of office as well as parish, city, town and/or election district)
ton Rouge LA 701	35
	Name of Political Perby:
hBir persons	SUPPORTED OPPOSED by the Committee
syttme Telephone (Preparer):	
	Rei of Aff. Org. to Comm: